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MATCH Number: **156111**
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Accredited by the
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Table of Contents

<u>Introduction</u>	4
<u>Psychology Setting</u>	4
<u>Accreditation Status</u>	5
<u>Program Structure</u>	5
<u>Internship Rotations</u>	7
<u>Major Rotations</u>	8
<u>Minor Rotations</u>	12
<u>Year-Long Rotation</u>	16
<u>Application and Selection Process</u>	16
<u>Training Model and Program Philosophy</u>	20
<u>Program Goals and Objectives</u>	20
<u>Core Competencies and Skills</u>	21
<u>Supervision</u>	23
<u>Time Allocation</u>	23
<u>Intern Evaluations</u>	25
<u>Other Training Experiences</u>	25
<u>Seminars</u>	25
<u>Requirements for Completion</u>	27
<u>Minimum Standards</u>	27
<u>Exit Criteria</u>	27

Table of Contents (cont'd)

<u>Locality and Diversity Awareness</u>	27
<u>Administrative Policies and Procedures</u>	28
<u>Privacy Policy</u>	29
<u>Self-Disclosure</u>	29
<u>Training Staff Profiles</u>	30
<u>Internship Admissions, Support, and Initial Placement Data</u>	36

INTRODUCTION

Welcome to our internship brochure. We hope you are staying healthy during these stressful times! The COVID-19 pandemic has created many personal and professional challenges around the world. As such, we live with uncertainty about what next week will bring, much less the next training year! We update this brochure knowing that we cannot definitively predict how specific training opportunities will look in 2022-2023. We can say that we will continue to utilize telehealth and technology-based service delivery platforms where appropriate. Our current class of interns is reporting to the VA to work in person, and they are providing a mix of telehealth and face-to-face clinical services. Their health and safety are top priorities, and we have processes in place to support them working from home (e.g., telework agreements, laptops, etc.) if needed. Please feel free to reach out to us if you have any questions or concerns.

Some things have not changed: our program, now in its 27th year, adheres to a generalist training model (i.e., practitioner-scholar framework) and provides services to veterans and their families in a beautifully mountainous, predominately rural Appalachian cultural setting.

PSYCHOLOGY SETTING

The James H. Quillen Veterans Affairs Medical Center (VAMC) provides an APA-accredited pre-doctoral psychology internship within the Mental Health Department. The main Quillen campus is part of the Mountain Home Healthcare System, which includes 10 satellite clinics serving 4 states: Tennessee, Virginia, North Carolina, and Kentucky. Our internship takes place on the main campus in Johnson City, TN. The Quillen campus currently employs 36 doctoral psychologists who serve patients in outpatient, acute care, medical, and residential settings. Each of the 36 psychologists has a primary assignment to a specific program, such as Consultation-Liaison, Substance Use Disorders Program, Posttraumatic Stress Program, Whole Health Program, etc. Of the 36, 22 Psychologists are currently faculty members in our Internship Program. Participating in our internship is an elective experience; psychologists are not required to do so. This voluntary participation sets us apart from some sites, as it ensures that only staff who are committed to training are involved in our program.

We are especially proud that 13 Mountain Home internship graduates are employed on our main campus. Also, three Training Committee members have been at Mountain Home for more than 26 years, providing professional continuity, institutional memory, medical center leadership, and mature mentors for newer staff members.

Many of our psychologists are involved in other pursuits, such as program coordination, program evaluation, teaching, or administrative duties. Monthly training in-services and scheduled committee meetings help promote professional solidarity among this large and decentralized psychology staff. Interns are viewed as junior colleagues, and issues of professional identity development and work-life balance are at the forefront of the internship year.

Located on a park-like campus of more than 200 acres in Johnson City, Tennessee, the

James H. Quillen Veterans Affairs Medical Center (VAMC) at Mountain Home is the primary medical and surgical teaching hospital for the James H. Quillen College of Medicine at East Tennessee State University (ETSU). Physician residency programs in surgery, medicine, family medicine and psychiatry are actively involved in health care delivery, as are ETSU training programs in nursing and other health care professions. The various clinical departments in the hospital have long track records of commitment to training and to the promotion of an atmosphere conducive to interdisciplinary exchange and development. VA medical centers that have active affiliations with medical schools and allied health programs tend to have more budget protection than non-affiliated VAs.

Built at the turn of the century, Mountain Home has been designated by the National Park Service as a National Historic Landmark. Only three other national homes for disabled volunteer soldiers have been awarded this distinction. The medical center won the Carey Award in 2013, based on quality metrics, which is bestowed on the top two VAMCs in the nation.

ACCREDITATION STATUS

The pre-doctoral internship at the James H. Quillen VA Medical Center is fully accredited by the Commission on Accreditation (CoA) of the American Psychological Association (APA). We have been fully accredited since August 23, 1996, shortly after our internship program was first established. We were re-accredited for seven years in November 2015. Our next site visit will be held in 2023 which was delayed due to the COVID-19 pandemic.

As an APA-accredited internship program, the faculty follows APA standards regarding prerequisites for predoctoral internship training. To address questions or concerns about the accreditation status of the internship program, applicants may contact the Committee on Accreditation at the following address:

Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE Washington, DC 20002-4242
Telephone: 202-336-5979
Fax: 202-336-5978
<https://www.apa.org/education/grad>
Email: apaaccred@apa.org

PROGRAM STRUCTURE

The internship program is administered through the Psychology section of the Mental Health Department at the James H. Quillen VAMC. The Training Committee, chaired by the Psychology Training Director, oversees admissions and evaluation procedures, training policy, rotation selections, and training goals for interns. The Committee meets monthly to execute administrative duties, set policy, monitor the program, and facilitate an effective internship of the highest quality possible for each intern. General

meetings of the Committee are open to interns.

The internship requires a minimum of 2,080 training hours, carries a stipend of \$26,297, and comprises 1 calendar year, beginning the week of the July 4th holiday. Other benefits include health insurance coverage, paid vacation and sick leave, all Federal holidays off, and 40 hours of paid professional leave. To provide a well-integrated model of predoctoral internship training, our program has the following features:

1. The rotational system consists of three major rotations, each of which lasts four months. Interns work about three days a week in their major rotations.
2. Concurrently, interns select two minor rotations, lasting six months each. Interns work one day per week in their minor rotations.
3. One non-VA, off-site rotation is available (Supervision).
4. Interns are given private offices, close to one another and to the Training Director.
5. Peer supervision (also known as “intern bonding time”) is from 3:30-4:30pm on Fridays.
6. Rotations are chosen by each intern, in conjunction with recommendations from internship faculty and the parent university. The most weight is given to interns’ preferences, with the additional goal of ensuring that interns gain experience in any previously missed major areas of practice. We believe that interns should have experience with residential, seriously mentally ill, geriatric, and substance-using populations, to round out generalist training. Additionally, interns select an individual psychotherapy supervisor for the year as they see longer-term therapy cases. This supervisor also functions as a professional mentor.
7. A year-long seminar series that combines didactic and clinical case material. Attendance is required.
8. Opportunities are made available for professional and personal growth via teaching, workshop presentations, supervision of a practicum student (where available), and participation in professional conferences.
9. For a \$30 fee for the year, interns have access to the employee gym.
10. Interns are encouraged to participate in activities held at JHQVAMC, including participation in our Diversity, Equity, and Inclusion (DEI) Committee.

INTERNSHIP ROTATIONS

<u>Major Rotations</u>	
<u>Geriatric Patient Aligned Care Team (Geri-PACT)</u>	8
<u>Outpatient Mental Health Clinic (OPMHC)</u>	8
<u>Post-Traumatic Stress Program (PTSP)</u>	9
<u>Psychology Consultation/Liaison Program</u>	9
<u>Psychosocial Residential Recovery and Treatment Program (PR RTP)</u>	10
<u>Substance Use Disorders Program (SUDP)</u>	11
<u>Minor Rotations</u>	
<u>Acute Inpatient Mental Health Services</u>	12
<u>Clinical Research</u>	13
<u>Cognitive Processing Therapy (CPT)</u>	13
<u>Couple and Family Therapy</u>	13
<u>Home-Based Primary Care</u>	14
<u>Psychology Program Evaluation</u>	14
<u>Substance Use Disorders Program (SUDP)</u>	15
<u>Supervision</u>	15
<u>Whole Health Integrative Mental Health (WHIMH)</u>	15
<u>Year-Long Rotation</u>	
<u>Long-Term Psychotherapy Supervision</u>	16

Major Rotations

Geriatric Patient Aligned Care Team (Geri-PACT)

Supervisor: Dr. Denise Gross

As part of the outpatient primary care program, this experience offers the opportunity to learn about the physical and mental health care needs of older adults in a collaborative setting. The intern will be part of an interprofessional team which consists of a physician, psychologist, nurse, RN nurse care manager, psychiatrist, social worker, pharmacist, and dietician. The intern has the opportunity to strengthen their assessment and therapy skills while also learning how psychology's unique knowledge and skills combine with those of other specialties to provide integrated, coordinated care to older adults and their families. Brief assessment and psychological interventions are targeted at reducing the impact of psychological disorders on physical health and medical issues and may include behavioral medicine issues (e.g., compliance, weight, smoking, etc.), depression, anxiety, grief, family issues, caregiver stress, and dementia-related behavioral problems. The intern will learn how to provide abbreviated clinical services in an integrated model, consult with other specialties, and develop the basic knowledge necessary for working in a medical setting, such as medical terminology, common medical disorders, and commonly prescribed medications. There is also an option of co-leading the structured Memory and Aging group through the Memory Care Clinic.

This rotation additionally provides the opportunity to gain experience in geriatric cognitive and neuropsychological assessment. The intern will learn to administer, score, and interpret a variety of instruments, write focused reports, and communicate results to patients, families, and providers. Brief cognitive screenings to establish baselines are common in Geri-PACT, and the intern may also perform more detailed cognitive assessments through the Memory Care Clinic. In addition, there is an opportunity to perform neuropsychological evaluations targeted at the differential diagnosis of dementia on a consultation basis. Patients typically have multiple comorbid medical conditions (e.g., hypertension, cardiac disease, diabetes, apnea, etc.) and the intern will have the opportunity to learn about the impact of neurologic and non-neurologic conditions on cognitive functioning.

Outpatient Mental Health Clinic (OMH)

Supervisors: Drs. David Bumgarner, Courtney Cook, and Ben Smith

The OMH rotation provides an opportunity to participate in a wide array of generalist training experiences. The Mental Health Clinic (MHC) serves as the hospital's primary hub for general outpatient mental healthcare and, as such, provides treatment primarily for trauma, anxiety and depression, among other presenting concerns (e.g., serious mental illness, PTSD, OCD, BPD, etc.). Specialty care experiences, such as psychodiagnostic assessment, are also available for interns who choose this rotation. Additionally, while the majority of training opportunities on this rotation are individual in nature, interns will also have the option to participate in couples and/or group therapy experiences. The outpatient clinic includes two interdisciplinary teams, each

consisting of a combination of psychologists, psychiatrist and/or psychiatric nurse practitioner, nurses and social workers. This rotation is offered as a major rotation.

Specific training opportunities on the OMH rotation:

- Evidence-based interventions (e.g., CPT, IBCT)
- Attend care coordination meetings (i.e., interdisciplinary meetings focused on facilitating care between/within different VA treatment programs)
- Facilitate/co-facilitate process/psychoeducational therapy groups
- Consultation with interdisciplinary treatment team
- Staff referrals to clinic with outpatient MH social workers/psychologists
- Conduct psychotherapy intake evaluations
- Administer and interpret assessment instruments (e.g., PAI, MMPI)
- Measurement-based treatment programming

Post-Traumatic Stress Program (PTSP)

Supervisors: Drs. Mandi Deitz and Andrew Presnell

The Post-Traumatic Stress Program (PTSP) is an outpatient specialty clinic devoted to the evaluation and treatment of Posttraumatic Stress Disorder. The PTSP comprises a small, well-integrated, interdisciplinary staff providing direct care to Veterans and significant others. Staff also provide consultation to other programs within the VAMC, as well as to Vet Centers in Johnson City and Knoxville.

Interns participating in the PTSP clinic can expect to learn more about the wide range of PTSD-related clinical presentations by conducting PTSD intakes using the CAPS-5, utilizing other assessment measures, and writing intake reports. Interns will also be given the opportunity to learn Evidence-Based Treatments (e.g., Cognitive Processing Therapy) by co-facilitating group CPT-C and by utilizing this modality with individual patients. Interns may have the opportunity to observe and receive training in other modalities (i.e., Prolonged Exposure) depending on patient needs represented in the clinic at that time. Other psychotherapy group facilitation opportunities are available, including: Moral Injury, PTSD 101 (i.e., psychoeducational group), Partners (i.e., for partners of Veterans diagnosed with PTSD), Anger Management for PTSD, OEF/OIF/OND, WWII/Korea, and Vietnam. Interns also will participate in weekly PTSP interdisciplinary (i.e., psychiatrist, nurse practitioner, nurse, social worker, psychologists) staff meetings.

Psychology Consultation-Liaison Program

Supervisor: Dr. Christine Adler

Psychology Consultation-Liaison is available as a major rotation with an emphasis in Oncology/Palliative Care. Dr. Adler specializes in Health Psychology and Palliative Care, and consults with Medical, Extended, Surgical, and Palliative Care Clinics. Depending on their areas of interest, the intern's responsibilities may include any of the following: therapy, assessment, and consultation with patients facing serious and/or life-threatening illness, their families, and medical center staff; decisional capacity

and pre-surgical psychological evaluations; Complicated grief and bereavement support; spiritual exploration and meaning-centered therapy; interdisciplinary team patient care; and biomedical ethics consultation.

Psychosocial Residential Rehabilitation and Treatment Program (PR RTP)

Supervisors: Drs. Matthew Dwyer and Sam Nekvasil

The Psychosocial Residential Rehabilitation Treatment Program (PR RTP) comprises a team of mental health professionals delivering psychosocial care in a residential setting. The target population is veterans who have been diagnosed with severe and persistent mental illness. The members of the PR RTP team include a program coordinator, two psychologists, three social workers, a psychiatrist, and a certified peer support specialist. The PR RTP team's goal is to help veterans who have severe and persistent mental illness achieve their short-term psychosocial goals through provision of the following services:

- Frequent supportive contacts within the residential setting
- Psychological assessment, individual therapy, and group therapy
- Social skills training
- Assistance in identifying and reaching their own individualized recovery goals
- Education about their symptoms and how to seek assistance for them
- Education about the recovery model, self-advocacy, and peer support
- Effective and proactive management of medications
- Education in use of community resources to maintain a healthy lifestyle
- Connection with as many resources as possible, including financial support, social support, physical support, emotional support, and spiritual support, to reach and maintain recovery and rehabilitation goals.

The purpose of these services is to reduce the number and length of psychiatric hospitalizations in patients with severe and persistent mental illnesses. The most frequent diagnoses in PR RTP are: PTSD, Bipolar Disorder, Schizophrenia, Schizoaffective Disorder, and Major Depressive Disorder. There is also a significant number of veterans with dysfunctional personality characteristics.

The intern in the PR RTP program will see veterans for psychotherapy (e.g., individual and group work), psycho-diagnostic assessments, and case management services. Supervision is provided in both direct and indirect formats. The intern will participate in groups and receive direct supervision. He or she will see individual patients and record the sessions for indirect supervision. The intern will be involved in every stage of the program, work with the full team in treatment planning, and will be considered a participating team member during the rotation.

Additionally, the intern on this rotation can gain experience in the evidence-based treatment modality of Cognitive Processing Therapy (CPT). The intern will also work with the PR RTP team regarding new referrals to the program to determine the appropriateness of the referral. The intern and a screening team, typically involving the intern's supervisor, will meet

with referred veterans for a screening appointment. The intern will assist in developing treatment goals and desired outcomes with the veteran, the veteran's support system, and treatment team members. The intern will continue to work with the veteran and provide psychotherapy, psychoeducational, and case management services. Some interns will be provided the opportunity to initiate a time-limited psychoeducational group. The intern may also be involved in crisis intervention services, BUT ONLY WITH SUPERVISION, and primarily in an observational role. It is not unusual for this rotation to have to provide a certification of need to the ER. The intern may observe this process in vivo, including the decision whether someone needs to be committed. Finally, the intern will also be involved in the administrative aspects of program management, patient care, program planning, and staff development. Groups that the intern may be able to observe and co-facilitate are social skills training for schizophrenia, CBT for depression and anxiety, cognitive processing therapy for PTSD, emotional coping skills, a dual-diagnosis group, and several other groups devoted to psychosocial recovery from psychiatric illness. This is a highly-integrated multidisciplinary team that is devoted to the recovery of those with chronic and severe mental illness.

Substance Use Disorders Program (SUDP)

Supervisors: Drs. Jerome Cook & Steven LaRowe

The Substance Use Disorders Program (SUDP) offers comprehensive training for diverse populations of Veterans with Substance Use Disorders. It is a multidisciplinary residential and outpatient treatment program for Veterans. SUDP, under the supervision of Dr. Cook, is founded upon empirically supported interventions including Cognitive-Behavioral Coping Skills and Twelve-Step Facilitation therapies. Cognitive-Behavioral Coping Skills structured group therapy offers treatment based on identification and practice of skills for avoiding relapse, such as refusal skills, problem-solving, crisis planning, etc. Twelve-Step Facilitation structured group therapy emphasizes familiarization with twelve-step recovery program principles and encouraging participation in mutual help organizations. In addition, group sessions provide information to Veterans on a wide range of alcohol and drug education topics. Additional group interventions are offered, such as CBT for Depression/SUD, Seeking Safety for PTSD/SUD, and SMART Recovery. Training is also available in Motivational Enhancement Therapy (i.e., a motivational interviewing approach to substance use) and contingency management. Intern duties will include group and individual psychotherapy, screening, diagnostic assessments, readings/self-study, and learning to function as an interdisciplinary team member in a residential/outpatient substance abuse treatment environment.

*This rotation can be selected as either a major or a minor rotation.

Minor Rotations

Acute Inpatient Mental Health Services

Supervisor: Dr. C. Adam Love

This rotation will focus on sharpening the intern's knowledge, skills and abilities in providing psychological services on an acute inpatient mental health unit, as well as on inpatient medical units where assessment or consultation is needed. Some of the challenges in terms of providing care on an acute unit are as follows:

- Length of stay varies from patient to patient.
- Psychotherapy that focuses on crisis intervention and short-term, solution-focused skill building instead of on long-term treatment planning.
- At any given time, the milieu on the unit may be different. This means that different treatment approaches may be more beneficial on a given day – depending on the milieu of the unit at the time.

The intern will have the opportunity to provide several different services during the completion of the rotation. As an example, the hours in a given week will be filled by some of the following services:

- Co-facilitating a weekly group on the unit (DBT skills focused) with the supervisor.
- Participation in one treatment team meeting per week, which will provide interdisciplinary interaction and will facilitate collaboration with diagnosis, treatment planning, and discharge planning for each patient on the unit.
- Individual therapy with 1-2 patients weekly (or as needed) that focuses on crisis intervention and solution-focused therapy.
- Individual supervision for one hour weekly.
- Psychological Assessment: The intern will be able to administer the Personality Assessment Inventory to assist with diagnostic clarification. There will also be the option of performing a memory assessment to look at possible dementia at times. In addition, the intern will write up the results and will share with the treatment team as assigned.
- Decisional Capacity Assessment: Intern will observe supervisor completing a Decisional Capacity Interview/Assessment and will have the opportunity to assist in the completion of an assessment as needed. Will discuss the ethical dilemmas associated with capacity and look at the template provided by the VA.
- Enhance case formulation and treatment through supervision, recommended readings, consultation, and provision of therapeutic activities.

In Acute Services, we serve veterans with the entire spectrum of psychiatric diagnoses and presenting issues, including depression, suicidal/homicidal ideation, psychotic disorders, PTSD, personality disorders, anxiety disorders, health issues, marital issues, family issues and substance abuse issues. Most patients present with multiple diagnoses from this list.

Responsibilities: Interns' responsibilities will vary depending on training goals, experience, and availability. Responsibilities will be negotiated with Dr. Love and will likely vary on a week-to-week basis (see above opportunities).

Recommended Readings: Will assign during supervision with intern depending on the interests of the intern.

Clinical Research

Supervisor: As arranged, from faculty listing (but usually Dr. Bibby)

This rotation can be an avenue through which an intern works to complete his or her dissertation research, with the support and supervision of a qualified internship faculty member. Duties will vary on this rotation, according to the needs of the intern and specific research program. Duties may include literature review, design input, running subjects, data analysis, or drafting articles for journal submission. It is the opinion of the internship faculty that interns should not be tackling new research projects until research is completed their dissertations.

Cognitive Processing Therapy (CPT)

Supervisors: Drs. Mandi Deitz and Andrew Presnell

This rotation involves learning and implementing CPT with multiple patients who have Posttraumatic Stress Disorder (PTSD). Trainees will develop an understanding of how to implement a manualized protocol while maintaining rapport and engagement, and how to apply core clinical concepts to specific patient presentations.

CPT is one of the most effective and strongly recommended treatments for healing from PTSD. Over the course of twelve sessions, patients learn to reassess the impact that trauma has had on their lives, particularly as it pertains to their beliefs about themselves, others, and the world in areas such as blame/responsibility, safety, trust, power/control, esteem, and intimacy.

Those who would like to achieve provisional VA CPT provider status may do so through this rotation. VA CPT provider status involves attending a 2-day CPT workshop, completing two full CPT cases, and participating in six months of weekly consultation calls with regional CPT trainer Dr. Catherine Hearne.

Couple and Family Therapy

Supervisors: Drs. Brian Abbott and Heather Zapor

The Family Clinic is an outpatient specialty clinic focused on enhancing Veteran's mental health recovery by strengthening family relationships. Interns participating in the couple and family rotation will gain experience in the provision of couple and family therapy. The rotation is designed to accommodate interns with varying degrees of prior training in couple and family therapy. Interns choosing this rotation can expect to receive supervision through co-therapy and review of recorded sessions. They will learn to conduct a thorough assessment of couple/family functioning that informs case conceptualization and treatment planning. They will learn to conceptualize cases from a systemic perspective, gain exposure to

a number of theoretical approaches for treating couples with a focus on Integrative Behavioral Couple Therapy (IBCT), and learn principles of child development and effective parenting. Common clinical issues presented by couples/families in this rotation include the following: PTSD, depression, anxiety, infidelity, stress related to blended families, sexual dysfunction, parenting problems, intimate partner violence, and family adjustment to medical and mental health illness. Interns can expect to gain an appreciation for the complex interplay between individual psychopathology and family functioning and how relationship therapy can serve as an effective primary and adjunctive treatment for many different types of mental health problems.

Home-Based Primary Care (HBPC)

Supervisor: Dr. Bridget Jeter

Home Based Primary Care (HBPC) provides comprehensive primary care services in the homes of Veterans who face complex medical issues that make it difficult to obtain care in the traditional outpatient setting. Our patients are typically older Veterans. HBPC provides medical care, nursing care, occupational therapy services, nutritional counseling, social work services, psychiatric medication management, psychology services, and clinical pharmacy services.

The Home-Based Primary Care minor rotation allows Interns the opportunity to learn about the provision of interdisciplinary medical treatment for home-bound Veterans located in the rural Appalachian region of Southwestern Virginia, Southeastern Kentucky, and Northeastern Tennessee. Interns will step into the Veteran's environment allowing them to gain cultural and family systems context, as well as the intersection of the Veteran's military experiences in the service of informing treatment. The Intern will also experience an interdisciplinary team approach to address chronic illness, mental health, cognitive and memory related concerns, family and safety concerns, bereavement and end of life issues for an aging population of Veterans who often have limited resources and access to care. The Intern will have the opportunity to gain experience with completing intake interviews, cognitive evaluation, capacity examination, treatment planning and provision within the home setting, and take part in some weekly treatment team meetings.

Psychology Program Evaluation

Supervisors: Various Faculty

Program evaluation is the application of social research tools that contribute to decisions on installation, continuation, expansion, certification, or moderation of programs (Online Psychology Dictionary). As Dr. Steve McCutcheon stated at the 2016 APPIC Membership Conference, "we [psychologists] are uniquely positioned to use our research training to provide program evaluation data to drive healthcare decisions." Interns have many opportunities to practice this skill, which is highly transferable to future employment. Examples include measuring outcome metrics and medical cost offset, evaluating access barriers, updating policies and program materials, and providing data for continuous quality improvement projects. The supervisor and activity will vary, depending on the program. Interns should select 1-2 programs to focus on during this rotation. Options include: PC-MHI, the Whole Health Program, PR RTP, and PTSP. Other program options may be available on a case-by-case basis.

Substance Use Disorders Program (SUDP)

Supervisor: Drs. Jerome Cook and Steven LaRowe

Please see [rotation description](#) listed under major rotations.

Supervision – ETSU Behavioral Health and Wellness Clinic

Supervisor: Dr. Diana Morelen

The Behavioral Health and Wellness Clinic is the departmental training clinic for ETSU's APA-accredited doctoral program in clinical psychology. Within this minor rotation, an intern will spend the first several weeks on didactics focusing on an evidence-based supervision models, and then he or she will begin to provide supervision and agency documentation for 1-2 junior level graduate student therapists. The clinic treats children, adults, and seniors living in Northeast Tennessee. Common presenting problems include: depression, anxiety, trauma exposure, stress related to stigmatized identities, and family systems issues. This rotation can be especially valuable for interns who hope to supervise doctoral students and/or interns in their careers. The scheduling of this minor rotation will be determined by the intern, Dr. Morelen, and student clinician and will not exceed 8 hours per week.

Whole Health: Integrative Mental Health (WHIMH)

Supervisor: Dr. Julie Culligan

- Participation in Interdisciplinary Whole Health Program, which includes: Complementary and Integrative Health (CIH) approaches, health and wellness coaching, integrative mental health modalities, and clinical teaching opportunities. Interdisciplinary team includes: Psychologists, Acupuncturist, Chiropractors, Physical Therapists & Physical Therapy Assistants, Social Worker, Chaplain, Functional Medicine Registered Dietitian, and Health Coaches.
- Participate in integrative mental health approaches, such as: Mindfulness, HeartMath biofeedback, hypnotherapy, CBT-I, guided imagery, health coaching.
- Participate in complementary movement approaches, such as yoga, tai chi, yoga Nidra, with goal of integrative movement into emotional wellness.
- Opportunity to participate in health coach training by NBHWC accredited VA program.
- Participate in interdisciplinary supervision to develop holistic approach to diagnosis and treatment.
- Participate in interdisciplinary programs, including "Project Resilience," an active self-management/integrative medicine clinic for Veterans experiencing issues related to pain, and Integrative Mental Health group for Veterans experiencing mental health conditions. Clinical activities to include: Mindfulness-Based Cognitive Therapy, Acceptance & Commitment Therapy, active self-management coaching, yoga, tai chi, and anti-inflammatory diet classes.
- Participate in "My Story" program, learning patient-provider communication skills while facilitating and transcribing Veteran's "story" into medical record.
- Participation in weekly journal article review to introduce/understand scientific basis for Integrative approaches.

- Opportunity to observe work with VHA national program office (Office of Patient Centered Care & Cultural Transformation), role of National Field Advisor for Whole Health Coaching.
- Program Development opportunities, as well as opportunity for data drive quality improvement research and program development available.
- The option to introduce clinical and administrative staff to Whole Health principles by teaching Whole Health 102 and/or primary care staff communication skills and motivational interviewing clinical staff.

Year-Long Rotation

Long-Term Psychotherapy Supervision

Supervisors: Various

Since the inception of our internship program, Mountain Home has placed a high value on providing interns with the opportunity to engage in long-term psychotherapy with veterans. Many of the Training Committee faculty do double-duty as rotation supervisors and also offer themselves as long-term psychotherapy supervisors. Interns are expected to carry an active long-term caseload of 3-5 patients and to attend weekly, hour-long supervision sessions. Interns are encouraged to select a supervisor based on the following criteria: interest in the supervisor's theoretical orientation, interest in the supervisor as a mentor, interest in the supervisor's professional identity, and/or interest in the supervisor's expertise with a specific patient population.

APPLICATION AND SELECTION PROCESS

<https://www.psychologytraining.va.gov/eligibility.asp>

Applicants must be U.S. citizens in good standing with and recommended for internship by an APA-accredited Ph.D. or Psy.D. program in clinical or counseling psychology, and they must have completed 3 full years of graduate study leading to the doctorate. The applicant must demonstrate interests and goals that are consistent with the internship program, the ability to apply assessment and intervention knowledge in clinical areas, appropriate ethical conduct, the interpersonal skills necessary for the professional practice of psychology, and sufficient research skills as evidenced by dissertation progress.

In normal years, the James H. Quillen pre-doctoral psychology internship requires a minimum of 1,000 total hours of supervised clinical experience (intervention + assessment + supervision). We will take into account potential decreases in clinical hours due to COVID-19. Under the category of assessment, the internship looks for a variety of assessment experience that includes traditional objective and projective assessment. Although the faculty would prefer

that applicants have exposure to projective assessment, it is not an exclusion criteria. The number of integrated reports expected is based on applicant group averages for prior years.

The faculty strongly prefers applicants who have their dissertation proposal approved by the start of the internship.

The preceding criteria serve as general guidelines for rating applicants and are not fixed rules. Faculty must rely upon their professional judgment in making decisions about applicants.

Applications are accepted through November 1. The Quillen VA Medical Center in which our training program resides is an Equal Opportunity Employer; we are committed to ensuring a range of diversity among our training classes, and we select candidates representing different programs and theoretical orientations, geographic areas, ages, racial and ethnic backgrounds, sexual orientations, disabilities, and life experiences. All things being equal, consideration is given to applicants who identify themselves as veterans, as members of historically underrepresented groups on the basis of racial or ethnic status, as representing diversity on the basis of sexual orientation, first-generation college students, or as representing diversity on the basis of ability status. These factors may be indicated on the application, if an applicant wishes to do so.

This internship program participates in the Matching Program administered by National Matching Services Inc. (NMS) on behalf of the Association of Psychology Postdoctoral and Internship Centers (APPIC). Only those applicants who participate in the Match can be matched to our internship program. All applicants must obtain an applicant agreement package from NMS and register for the Match to be eligible to match. Applicants can request an applicant agreement package from NMS through their [web site](#) at or by mail. Applicants may contact NMS at either of the following addresses:

National Matching Services Inc.
20 Holly Street, Suite 301
Toronto, Ontario
Canada, M4S 3B1

Telephone: (800) 461-6322
Fax: (844) 977-0555

Or

Acceptances and notification procedures follow the Association of Psychology Postdoctoral and Internship Centers (APPIC) Match Policies. This internship site agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant. APPIC Match Policies are available on the APPIC [website](#).

For purposes of the Internship Matching Program, the program code number for the

James H. Quillen VA Psychology Internship Program is: **156111**.

The internship program utilizes the AAPI Online application on the APPIC [website](#).

Faculty will screen applicants for interviews. Interviews will then be offered to selected applicants. This process will also include the opportunity to meet with the Training Director, current interns, and other rotation supervisors. Due to COVID-19, all interviews/meetings will be conducted virtually for the 2022-2023 training year. Interviews will be scheduled during the months of December and January. The latest interview notification date is December 15. An applicant may contact the Psychology Training Director by e-mail or at (423) 979-2893 to inquire about an interview or the status of her or his application.

The Department of Veterans Affairs adheres to all Equal Employment Opportunity policies.

Once applicants match with our site, they then have to meet several other criteria in order to be able to work and train at a VA:

Interns are Veterans Health Administration (VHA) Health Professions Trainees (HPTs) who are appointed as temporary employees of the Department of Veterans Affairs and subject to laws, policies, and guidelines posted for VA staff members. Occasionally, this guidance can change during a training year, and it may create new requirements or responsibilities for HPTs (for example, being required to get a COVID-19 vaccine). Interns will be provided with an explanation for the change and given a reasonable amount of time to comply. Other requirements to be a Federal employee in the VA system include:

- 1. U.S. Citizenship.** HPTs who receive a direct stipend (pay) must be U.S. citizens.
- 2. U.S. Social Security Number.** All VA appointees must have a U.S. social security number (SSN) prior to beginning the pre-employment, on-boarding process at the VA.
- 3. Selective Service Registration.** Male applicants born after 12/31/1959 must have registered for the Selective Service by age 26 to be eligible for U.S. government employment, including selection as a paid or WOC VA trainee. For additional information about the Selective Service System, and to register or to check your registration status, click [here](#).
- 4. Fingerprint Screening and Background Investigation.** All HPTs will be fingerprinted and undergo screenings and background investigations. If you fail the background check, you cannot be an intern at the VA. Additional details about the required background checks can be found [here](#).
- 5. Drug Testing.** Per Executive Order 12564, the VA strives to be a Drug-Free Workplace. HPTs are not drug-tested prior to appointment; however, they are subject to random drug testing throughout the entire VA appointment period. You will be asked to sign an acknowledgement

form stating you are aware of this practice. Please note that regardless of whether marijuana use is legal in your state, it remains illegal in the Federal system. You could be subject to removal from our internship if you test positive for cannabis, even if you have a prescription for it. For more information, please click [here](#).

6. **TQCVL.** In order to on-board HPTs, the VHA's Office of Academic Affiliations (OAA) requires completion of a Trainee Qualifications and Credentials Verification Letter (TQCVL). An Educational Official at the Affiliate (university) must complete and sign this letter.
 - a. **Health Requirements.** Among other things, the TQCVL confirms that you, the trainee, are fit to perform the essential functions (physical and mental) of the training program and immunized following current Center for Disease Control (CDC) guidelines and VHA policy. This protects you, other employees, and patients while working in a healthcare facility. Tuberculosis screening, Hepatitis B vaccine, and annual influenza vaccine (and possibly the COVID-19 vaccine in the future) are required. *Declinations are EXTREMELY rare.* If you decline the flu (and possibly COVID) vaccines, you will be required to wear a mask while in patient care areas.
 - b. **Primary source verification of all prior education and training** is certified via the TQCVL. Training and Program Directors will be contacting the appropriate institutions to ensure you have the appropriate qualifications and credentials as required by the admission criteria of the training program in which you are enrolled.
7. **Additional On-boarding Forms.** Additional pre-employment forms include the Application for Health Professions Trainees (VA 10-2850D) and the Declaration for Federal Employment (OF 306). These documents and others are available online for review [here](#). Falsifying any answer on these required Federal documents will result in the inability to appoint or immediate dismissal from the training program.
8. **Proof of Identity per VA.** VA on-boarding requires presentation of two source documents (IDs). Documents must be unexpired and names on both documents must match. For more information click [here](#).



Duck Pond at entrance to JHCVAMC Campus

Photo by Stephen Smith, Psy.D.

Training Model and Program Philosophy

The Psychology Internship Program adheres to a generalist model of education and training. In all experiential activities, we promote the development of a strong professional identity that incorporates critical thinking, ethical practice, multicultural sensitivity, and self-reflectivity. We believe that sound clinical practice develops from an understanding of empirical knowledge and critical, scientific thinking. We want to encourage interns to develop professional attitudes and skills that will enable them to effectively help those whom they serve and to do so in an ethical manner. We desire to promote humility and ongoing learning about issues of individual and cultural diversity. We encourage interns to develop professional skills in self-reflectivity. The essential characteristics of this model involve development of interlocking skills to foster a career-long process of psychological service.

Program Goals and Objectives

We believe this generalist model to be an effective one for training interns and for promoting the advancement of psychology as a profession in our region. The goals of our training program are in keeping with this generalist training orientation. They are as follows:

- Goal 1. Interns will develop the clinical and professional skills to practice psychology competently as a generalist.
- Goal 2. Interns will obtain a diverse range of clinical training experiences to enable them to function competently as generalists.
- Goal 3. Interns will demonstrate competent skills in scientific inquiry, in critical thinking, and in integrating scientific knowledge into current practice situations.
- Goal 4. Interns will develop competent skills in professional behavior and ethical practice.

Goal 5. Interns will demonstrate professionally competent behavior in dealing with individual and cultural diversity.

Goal 6. Interns will demonstrate professionally competent behavior in self-reflectivity.

Our program adheres to the American Psychological Association's Standards of Accreditation (SoA). Within these standards, nine core competencies are expected to be the focus of internship training:

Core Competencies and Skills

Research

Ability to critically evaluate research, integrate research knowledge into professional activities, disseminate research or other scholarly activities, show awareness of potential sources of bias, design and/or implement program evaluation.

Ethical and legal standards

Ability to demonstrate knowledge of and act in accordance with the current version of the APA Ethical Principles of Psychologists and Code of Conduct; demonstrate knowledge of and act in accordance to relevant laws, standards, regulations, and policies governing health service psychology in the Mountain Home VA Medical Center as well as the organizational, state, and federal levels; demonstrate the ability to recognize and articulate ethical dilemmas as they arise with patients; apply ethical decision-making processes to resolve dilemmas; exhibit professionalism and ethical behavior in all activities.

Individual and Cultural Diversity

Ability to be generally sensitive and responsive to issues of individual and cultural diversity; understand how personal/cultural history, attitudes, and biases may affect understanding and interaction with different people (self-reflectivity); demonstrate knowledge of current theory and research related to addressing diversity across all professional activities (scholarly awareness); integrate self-reflectivity and scholarly awareness of diversity in the conduct of all professional roles; work effectively with individuals whose diversity creates conflict with worldviews; apply knowledge and demonstrate effectiveness in working with a range of diverse individuals.

Professional values, attitudes, and behaviors

Ability to demonstrate concern for the welfare of others and their general well-being in all professional contexts; develop and maintain effective relationships with a wide range of individuals; appropriately manage boundaries in all professional activities; receptive to supervision and ongoing learning and actively seek feedback in a professional manner; demonstrate awareness of own areas of competence and appropriate level of confidence in working with patients; demonstrate awareness of areas of limitations; recognize how personal characteristics impact clinical work; integrate self-knowledge into clinical practice; demonstrate ability to assess consequences of own actions; accountable, dependable, responsible, and shows

initiative; respond professionally to increasingly complex situations with a greater degree of independence commensurate with training.

Communication and interpersonal skills

Ability to clearly communicate orally and in writing; reflect thorough grasp of professional language and concepts; develop and maintain productive and respectful relationships with clients, peer/colleagues, supervisor, and other professional disciplines; demonstrate non-verbal communication to further develop effective relationships; manage difficult and/or conflictual interpersonal processes with balance of respectfulness, appropriate boundary-setting, and assertive communication.

Assessment

Ability to discern referral question; select appropriate assessment methods based on best available empirical literature, appropriateness to referral question, and diversity characteristics of patient; effective uses of interview techniques; competence in test administration; interpret assessment findings to guide case conceptualization, classification, and recommendations; effectively communicate finding in written format; provide oral feedback to patient and/or referral source in effective and sensitive manner.

Intervention

Ability to establish and maintain effective relationships with recipients of psychological services; develop evidence-based case formulation and intervention plans specific to service delivery goals; demonstrate competence in assessing risk factors and utilize appropriate procedures with at-risk patients; implement intervention informed by current scientific literature, assessment findings, diversity characteristics, and contextual variables; implement specific interventions taught; manage cases and apply relevant research literature and program goals to clinical decision making; modify and adapt evidence-based approaches effectively; evaluate therapy content, process, and intervention effectiveness and adapt goals and methods consistent with ongoing evaluation.

Supervision

Ability to demonstrate knowledge of supervision theories and models from the scientific literature; provide constructive feedback/guidance; address boundary and power differential issues in the supervisory relationship; appropriately address resistance and other challenges; integrate awareness and knowledge of individual and cultural diversity in supervision; demonstrate awareness of and adherence to ethics in supervision.

Consultation and interprofessional/interdisciplinary skills

Ability to discern referral source and question; develop evidence-based case formulation; utilize knowledge of consultation models and practices to select appropriate consultation strategy; demonstrate knowledge of and respect for the roles and perspectives of other professions; implement consultation through intentional collaboration with individuals and their

families, other health care professionals, interprofessional groups, and health systems; make concise documentation with timely feedback to the referral source; actively participate in clinic and interdisciplinary meetings.






Supervision

Frequent formal supervision is a high priority of the James H. Quillen VAMC internship program. Each intern should receive a minimum of 4 hours per week of regularly scheduled supervision, 2 hours of which are on an individual basis. On average, our interns obtain over 5 hours of supervision per week. Some faculty will supervise via a hands-on approach of having interns collaborate in their clinical sessions. All internship faculty are expected to be flexible enough with their time to allow for unscheduled, informal supervision opportunities.

Our goal is that each intern will have 2 faculty supervisors who qualify as mentors. Mentors provide interns with professional role models whom they may observe performing professional activities and with whom they may discuss professional issues or problems. Mentors are operationally defined from ratings derived from the interns and faculty rating forms.

Time Allocation

A minimum of 25% of the intern's time, or 520 hours, must involve patient care, per APPIC rules. Formal supervision will account for at least 200 hours of the training experience but possibly as much as 300 hours (approximately 15%). This will entail a minimum of 4 hours of formal supervision per week. The allocation of formal supervision time is as follows:

-  1 hr. per week Individual Supervision (Major Rotation)
-  1 hr. per week Individual Supervision (Minor Rotation)
-  1 hr. per week Administrative/Supportive Group Supervision
-  1 hr. per month (at minimum) Peer Group Supervision
-  1 hr. per week Individual Supervision (Long Term Psychotherapy)

Another 250 hours should be devoted to didactic training (12%). Research/reading, staff meetings, and administrative duties may comprise 250 hours (12%) of the interns' time. Administrative duties unrelated to patient care are not generally assigned to interns.



Photo of 2020-2021 Intern Class and Dr. Elder



Photo of 2018-2019 Intern Class, Carter Fold staff, and Dr. Jerry Cook

Intern Evaluations

With regular monitoring and communication, problems or deficiencies that arise may be resolved quickly before becoming compounded. Interns have a right to be kept regularly informed of their progress throughout the program.

Interns will receive written mid-point and end-point evaluations by their rotation supervisors. At these designated times, interns will also complete self-assessments. The development of self-reflectivity is a critical aspect of interns' work with supervisors and of the internship training process. Interns complete self-assessments of their performance as part of the evaluation process.

During the year, interns will not only receive but also will have the opportunity to provide evaluative data. At the end of each rotation, interns submit formal ratings of the site and supervision received on the Rotation and Supervisor Evaluation Form. Interns also provide ratings and comments regarding each session in the year-long internship seminar series.

Other Training Experiences

Seminars

Seminars will be held most Fridays throughout the internship year. The topics are divided into 8 series. Some of the series and topics are listed below:

- Psychological Assessment (*e.g., Neuropsychological Assessment, Kinetic House-Tree-Person Drawing, Introduction to the RBANS, Using Measurement-Based Care in Treatment Planning*)
- Psychological Interventions (*e.g., Acceptance and Commitment Therapy, Prolonged Exposure, Cognitive Processing Therapy, Motivational Interviewing, Couple and Family Therapy*)
- Professional Practice (*e.g., Private Practice, Job Hunting, Suicide Prevention, Psychopharmacology, Supervision, Multidisciplinary Consultation*)
- Multiculturalism & Diversity (*e.g., Disability Awareness, Appalachian Culture, Psychotherapy with LGBTQ Clients, When Patients Are Racist, Transgender Health Issues*)
- Health Psychology (*Medical Transplant Evaluations, Oncology and Psychology, Dementia, Whole Health Coaching*)

Interns are required to attend and participate in the seminars. Seminar sessions will combine didactic material with a focus on specific case illustrations. Some faculty will present their own clinical cases for discussion.

Other training opportunities afforded the interns are monthly Psychology In-service presentations and Grand Rounds (in Medicine, Oncology and Psychiatry). Interns may participate in additional seminars or professional presentations, as agreed upon by their rotation supervisors

and the Psychology Training Director.

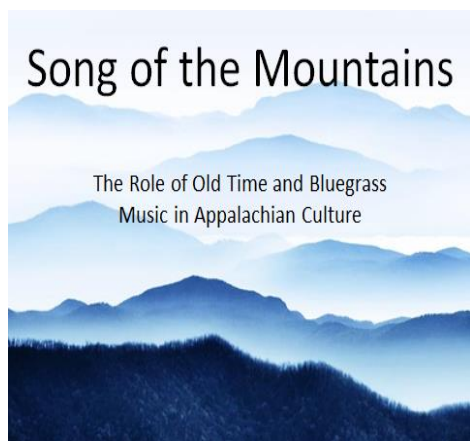
The faculty in the Psychology Internship Program offer training to psychology interns in multiple empirically based treatment models (including Prolonged Exposure, Acceptance and Commitment Therapy, Motivational Interviewing, Integrative Behavioral Couple Therapy, Cognitive Processing Therapy). These models are taught within the context of the intern seminar series, rotation assignments, and individual supervision.

Care for LGBTQ+ Veterans

Though not a formal rotation, a variety of opportunities are available to interns to allow for experience working with LGBTQ+ veterans during the training year. Potential opportunities include providing individual psychotherapy, observing or conducting hormone or surgical readiness evaluations, and collaborating with other disciplines that offer additional gender-affirming treatments (i.e., speech and language therapy, prosthetics, primary care). Interns may also have the opportunity to observe and/or co-facilitate group therapy. Two groups for LGBTQ veterans are currently available: Thrive (for LGBTQ veterans) and Transcend (for transgender or gender-nonconforming veterans). The opportunity to attend Transgender Care Team meetings is also available.

Multicultural Diversity Project

Each year, the interns are required to complete a multicultural diversity project of their choosing that is designed to enhance their understanding of diversity issues. Consultation with training faculty and other providers is encouraged. This project is often presented as an in-service to the psychology staff to help promote diversity awareness throughout mental health services at the James H. Quillen VAMC.



Examples of Past Projects:

- The Impact of COVID-19 on Different Generations
- Understanding the “Q” in LGBTQ
- How to Handle Client Prejudice in Therapy
- Understanding Sex Positivity and Kink Culture
- Intersection of Therapist and Client Identities

Along with the focus on multicultural diversity within the Intern Seminar Series, all interns participate in weekly group supervision, with emphasis on concepts such as military, VA, and Appalachian culture.

Interns are also encouraged to be active members on the Diversity, Equity, and Inclusion (DEI) Committee to evaluate, plan, implement, and monitor JHQVAMC efforts to become a more culturally competent institution. A part of this committee’s focus is finding presenters who can instruct our staff and trainees on multicultural concepts at the monthly Psychology In-services.

REQUIREMENTS FOR PROGRAM COMPLETION

Minimum Standards

Supervisors evaluate intern performance on the Intern Evaluation Form at the end of a rotation, which provides a rating scale for the 9 core competencies and their specific skill areas. They rate interns on 5-point Likert scales.

Supervisors meet monthly to review and to discuss intern progress in the Psychology Training Committee. Competency level 4 is the expected exit level for interns graduating from the internship program, except for some specialized areas of practice. At this level of competency, the intern needs occasional supervision; competency is attained at the entry level psychologist position with continued supervision recommended; documentation of supervision on site is required while in training status; direct observation is not required.

Exit Criteria

To complete the internship program successfully, an intern must meet the following minimum requirements:

- ✚ Completion of 2080 hours of internship training.
- ✚ A minimum of 520 hours of patient care.
- ✚ A minimum average of 4 hours of supervision per week, at least 2 hours of which will include individual supervision.
- ✚ Completion of all rotation and supervisory assignments designated by the Psychology Training Committee.
- ✚ Achievement of standards expected of an intern in this program on the competency-based evaluations of the Intern Evaluation Form.
- ✚ Satisfactory resolution of all remedial training plans.
- ✚ Completion of a multicultural diversity project.
- ✚ Attainment of requirements for functioning in an entry-level psychologist position as a generalist practitioner.

LOCALITY AND DIVERSITY AWARENESS

The James H. Quillen VA Medical Center (VAMC) was originally the Mountain Branch of the National Home for Disabled Volunteer Soldiers, founded in 1903. Our VA is in Johnson City, Tennessee (pop. 66K); neighboring cities Bristol and Kingsport comprise a Tri-Cities area of 0.5 million people. Johnson City is a thriving university town with an emphasis on healthcare, professional, and service occupations. Low crime rates, moderate climate, ease of commuting, low cost of living, scenic beauty, and a friendly small-town ambiance are all desirable factors reported by those who have been attracted here.

Often, interns from outside the region are surprised that Johnson City does not match the stereotypes of Appalachia propagated by national media outlets. We have four Starbucks cafés

and a Bonefish Grill – we are not roughing it here.

The surrounding area is rural, mountainous, and beautiful, with a rich historical past, a vibrant Appalachian culture, and exceptional outdoor recreation opportunities. Five Tennessee Valley Authority (TVA) lakes, 10 ski slopes, whitewater rafting, and the Appalachian Trail are less than an hour away by car. Smoky Mountain National Park is a 2-hour drive. The area also provides community theater, numerous festivals, and an array of music venues. The VAMC is located approximately 100 miles from Knoxville, Tennessee, and approximately 65 miles from Asheville, North Carolina.

Although the faculty is cognizant of the homogenous ethnicity of the East Tennessee population, we strive to address diversity issues and have made education in diversity awareness a formal part of our program efforts. As the area continues to diversify, the staff has made efforts to increase access for mental health services to more traditionally stigmatized populations to include female veterans, those identifying as LGBTQ or transgender, and those of minority races/ethnicities. In addition, interns have opportunities to work with veterans with physical limitations, homelessness, low socioeconomic status, and limited education/literacy. We teach our faculty supervisors and interns to incorporate sensitivity to individual and cultural diversity into what they do on a practical, clinical level. We established a Multicultural Diversity Committee (now DEI Committee) 21 years ago, to help monitor and promote our awareness as a culturally competent organization. We regard multicultural competence as essential to the mission of the Psychology Service.

The Office of Diversity Management and Equal Employment Opportunity (DM&EEO) provides leadership in creating and sustaining a diverse workforce free of discrimination at the Department of Veterans Affairs. For more information, visit the Web site at Office of Diversity and Inclusion, U.S. Department of Veterans Affairs. The Office of Diversity and Inclusion offers guidance to VA facilities on implementing activities for special observances, which can be found [here](#).

ADMINISTRATIVE POLICY AND PROCEDURES

Due Process in Action: The Identification and Management of Intern Problems or Impairment

The Intern Training Manual provides interns and faculty a definition of impairment, an explicit discussion of due process, appeal, and grievance procedures, considerations for remediation, and a listing of possible sanctions. The Psychology Training Director covers these issues during new intern orientation. These documents are available upon request.

Privacy Policy

We will not collect any personal information from you when you visit our website.

Self-Disclosure

In the supervision of interns, the faculty believes that an intern's awareness and use of self are important professional tools for facilitating interpersonal interactions. We believe that forming a positive working alliance is an indispensable ingredient in any helping relationship. We encourage interns to explore and understand those qualities and characteristics that they bring to each interpersonal encounter. We want interns to recognize, improve, and employ personal qualities that will assist them in forming effective working relationships with patients, peers, faculty, staff, and other members of the community.

The faculty is committed to promoting intern development, respecting intern privacy, and avoiding the misuse of power that can accompany multiple roles. Towards these ends, the faculty supervisors respect the ability of interns to choose what personal information is appropriate for disclosure to faculty. There are exceptions to this general rule. In some situations, it is necessary for faculty to evaluate or obtain assistance for interns whose personal problems prevent them from performing their training activities or professional duties in a competent manner or whose behavior may pose a threat to self or others. In these situations, the faculty may ask for personal information to make a responsible decision. In so doing, the faculty members will follow guidelines for remediation and due process described in the program manual. Although the faculty recognizes that interns may need or benefit from psychotherapy, supervisors do not establish therapy relationships with interns or with anyone with whom such an arrangement would create a potentially harmful or exploitative dual relationship.

TRAINING STAFF PROFILES

* Denotes fulltime VA staff.

† Denotes faculty who are licensed.

‡ Denotes faculty who are provisionally licensed.

§ Denotes those Psychologists designated as Health Service Providers by the State of Tennessee.

Abbott, Brian, Ph.D., * †§ Texas A&M University, College Station, TX, 2005; Mental Health Specialty Care Program Manager, VA consultant on Integrative Behavioral Couple Therapy (2011-2017), Evidenced-based Psychotherapy Coordinator (2011-2018)

Professional interests: Couple and family therapy, understanding link between interpersonal and intrapsychic process, treatment of trauma and personality disorders

Personal hobbies and activities: Exploring Appalachia, mountain biking, hiking, skiing, and spending time with family

Adler, Christine M., Ph.D., * †§ SUNY at Albany, 1989; Assistant Chief, Psychology Service; Staff Psychologist, Consultation-Liaison (Health Psychology)

Professional interests: Meaning-making in grief and loss; coping with life-threatening illness

Personal hobbies and activities: Exercise, travel and time w/family, volunteer work with American Cancer Society & Local Organ Procurement Agency

Armour, Erin, Psy.D., * †§ Wright State University School of Professional Psychology, 2012; Staff Psychologist

Professional interests: Animal-assisted therapy, adjustment to illness and disability, intimate partner violence, and the impact of nutrition on mental health

Personal hobbies and activities: Cooking, walking/hiking, reading, writing, singing, hosting potlucks, and community service

Barteck, Katherine, Psy.D., * †§ Loyola University Maryland, 2012; Staff Psychologist, LGBTQ+ Veteran Care Coordinator, Transgender Health Facility Lead

Professional interests: Interpersonal process approach, transgender and gender diverse healthcare, and community and organizational leadership

Personal hobbies and activities: Family time, community engagement

Beck, Emily, Ph.D., * †§ University of South Carolina, 2010; Chief, Psychology Specialty Services

Professional interests: Interpersonal neurobiology, trauma, attachment, ACT, DBT

Personal hobbies and activities: Goofing off with my kids, swimming, live music, a good cup of coffee, spending time outdoors

Bibby, Maureen, Ph.D., * †§ Auburn University, 2001; Staff Psychologist, Member of Disruptive Behavior Committee and Employee Threat Assessment Team

Professional Interests: Cognitive Assessment and Capacity Evaluations

Personal interests and hobbies: Time with family and friends, involvement in church, reading

Bloch, Andrew H., Psy.D. *†§ The Wright Institute, 2012; Staff Psychologist, Whole Health Program

Professional interests: Sleep, Meditation, Hypnotherapy, Acceptance & Commitment Therapy

Personal hobbies and activities: Hiking, eating, worrying

Bumgarner, David, Ph.D., *†§ East Tennessee State University, 2015; Outpatient Mental Health, Staff Psychologist

Professional interests: rurality and health, substance use treatment, psychospiritual aspects of therapy (forgiveness, mindfulness, compassion).

Personal hobbies and activities: Spending time with family, hiking, biking, listening to and playing music

Cook, Courtney L., Ph.D., *†§ East Tennessee State University, 2017; Staff Psychologist

Professional interests: Primary care mental health, ACT, process work, attachment, transgender healthcare

Personal hobbies and activities: Time with friends and family, my cats, nonsensical television, reading, traveling, laughing and not taking life too seriously

Cook, Jerome, Ph.D., *†§ Vanderbilt University, 1992; Staff Psychologist, Substance Use Disorders Program

Professional interests: Psychology of addictive behavior; motivational interviewing; Cognitive-Behavior Therapy for SUD; Contingency Management; Trauma and Recovery

Personal hobbies and activities: Soccer, hiking, Americana music, German language/literature

Culligan, Julie, Ph.D., *†§ SUNY at Buffalo, 1997; Health Behavior Coordinator, Primary Care; Mental Health Clinic

Professional interests: Wellness behavior, motivation, health psychology

Personal hobbies and activities: NIA, dancing and playing with my children, drumming, music, and nutrition and fitness

Deitz, Mandi F., Ph.D., *† East Tennessee State University, 2014; PTSD Staff Psychologist

Professional interests: Combat-Related PTSD and Moral Injury in Rural Appalachian Veterans

Personal hobbies and activities: Backpacking, camping, hiking (basically any outdoor activity), and playing the banjo

Dwyer, Matthew, Ph.D., *† University of Kentucky, 2005; Staff Psychologist, Psychosocial Recovery Treatment Program

Professional interests: Trauma and recovery, clinical supervision, group therapy, process-oriented treatment

Personal hobbies and activities: Skiing, astronomy, mountain biking, automobiles

Elder, Myra Q., Ph.D., *†§ Temple University, 1996; Psychology Training Director, Staff Psychologist, Interim Co-Chair of the DEI Committee, A Different World Book Club facilitator

Professional interests: Appalachian culture and its depiction in the media; the intersection of military and Appalachian cultures; complex PTSD

Personal hobbies and activities: Travel, military and Appalachian history, keeping up with my teenagers, hiking, wrangling two large dogs

Finger, William, Ph.D., †§ University of Missouri-Columbia, 1989 (licensed and HSP, not full-time VA)

Professor, Departments of Medical Education and Psychiatry; Quillen College of Medicine, ETSU
Dean of Students, Modern Sex Therapy Institute; Conference Manager, Team River Runner, Inc.; Instructor - ACA L4 Whitewater Kayak and L4 SWR

Professional interests: Health Psychology (diabetes, spinal cord injury, chronic illness, sexuality)

Personal hobbies and activities: whitewater and sea kayaking, mountain biking, hiking

Gilley, Kristina, LCSW, *† East Tennessee State University, Master of Social Work, 2013; Mental Health Outpatient Social Work Case Management Coordinator

Professional interests: Acceptance and Commitment Therapy, childhood and adult trauma, severe and persistent mental illness

Personal hobbies and activities: reading, traveling, spending time with my fur babies

Gross, Denise K, Psy.D., *†Florida Institute of Technology 1989; Staff psychologist/ neuropsychologist, Memory Evaluation Clinic and Geri-PACT primary care.

Professional Interests: Neuropsychology of behavior, neuropsychological assessment with focus on dementia and TBI, psychological assessment, diagnostic evaluation

Personal interests: hiking/camping, spending time with my family and dogs, Humane Society volunteer activities, enjoying local events

Hillhouse, Joel, Ph.D., †§ SUNY at Albany, 1989; Professor of Community Health, East Tennessee State University

Holland, Kerry, Ph.D., †§ University of Missouri-Columbia, 1994; Clinical Director, East Tennessee State University Doctoral Psychology Program

Jeter, Bridget R., Ph.D., *† East Tennessee State University, 2019, Staff Psychologist; Home Based Primary Care

Professional interests: Chronic health, aging, & end of life issues; Cognitive assessment to support treatment; Mindfulness based therapies; Mental healthcare & resilience in Appalachia

Personal hobbies and activities: Family & friend time, Driving, Concert-going, Eating well

Karbasi, Amy, Psy.D., *†§ Xavier University, 2012; Clinical Psychologist

Professional interests: Treatment of chronic pain; health psychology; evidence-based psychotherapies

Personal hobbies and activities: Hiking, exploring the area, health, and fitness

LaRowe, Steven D., Ph.D., *† Florida State University 2002; Staff Psychologist

Professional interests: Substance abuse, program evaluation

Personal hobbies and activities: Musician, home projects, hiking

Love, C. Adam, Psy.D., *†§ Regent University, 2010; Acute Services Psychologist

Professional interests: Serious and persistent mental illness; Religious and Spirituality Integration with Mental Health; Personality Assessment and differential diagnosis; Mindfulness and Dialectical Behavior Therapy

Personal hobbies and activities: Music – both playing guitar and attending concerts; Spending time with family and kiddos; Learning about history; Keeping up with the Dallas Cowboys

Mason, Katie, Ph.D., *† University of North Carolina at Greensboro, Greensboro, NC, 2014, Staff Psychologist in Mental Health Clinic, Evidence-Based Psychotherapy Coordinator for VA Medical Center

Professional interests: Evidence-based psychotherapies (particularly, CBT, ACT, DBT), treatment of personality disorders, romantic relationships/couple therapy

Personal hobbies and activities: Spending time with family and friends, exploring Asheville food scene, hiking

Tonya McKoy, Ph.D., †§ Tennessee State University, Nashville, TN, 2019, Clinical Psychologist, HSP

Professional interests: African American culture, Diversity & Inclusion, and grief transitions

Personal hobbies and activities: Writing poetry, traveling, and spending time with family

McKinney, Jessica, Ph.D., * † East Tennessee State University, Johnson City, TN, 2019, Staff Psychologist, PTSP

Professional interests: Treatment of trauma-related disorders and suicide, posttraumatic growth, self-compassion and its impact on shame and guilt related to PTSD

Personal hobbies and activities: Being outdoors, video games, spending time with my dogs, and finding good food

McPherson, Meagan, Psy.D., *† The Wright Institute, Berkeley, CA, 2011; Clinical Neuropsychologist, Outpatient Neuropsychology Clinic

Professional interests: Neurocognitive assessment, personality assessment, therapeutic feedback, advocacy for cognitively impaired patients, anything Brené Brown and Control Mastery Theory

Personal hobbies and activities: Wearing pajamas whenever possible, reading (primarily fiction), sunshine, laughing and dancing with my six-year-old son, road trips, the never-ending quest to find motivation to exercise, spending time with my mom and my East Tennessee chosen family

Meredith, Gerald, DNP, APRN-BC, *† Vanderbilt University, Doctor of Nursing Practice 2010; Psychiatric Mental Health Nurse Practitioner

Professional interests: Neurology, Traumatic Brain Injury, Anxiety in young adults

Personal hobbies and activities: Reading, bike riding, grandparenting, listening

Morelen, Diana, Ph.D., † University of Georgia, 2014; Assistant Professor, ETSU, Department of Psychology

Professional interests: Perinatal mental health, infant mental health, trauma, dissemination and implementation of evidence-based programs, parenting, emotional development, diversity equity inclusion and belongingness; clinical supervision, reflective supervision

Personal hobbies and activities: Yoga, being a mama to twin boys, nature-based activities, being a restaurant wife (my partner is chef/owner of Timber!), travel, quality time with loved ones

Moser, Michele R., Ph.D., †§ Miami University (Ohio), 1992; Director and Psychologist, Center of Excellence for Children in State Custody, East Tennessee State University, Assistant Professor, Department of Psychiatry and Behavioral Science

Professional interests: Children's mental health and child welfare, dissemination of evidenced based practices in children's mental health, and trauma and attachment in children

Personal hobbies and activities: Reading and being active in the Intermountain Psychological Association

Nekvasil, Samuel L., Ph.D., *†§ Purdue University, 2018; Staff Psychologist

Professional interests: Identity, meaning-making, and gender norms

Personal hobbies and activities: Anything outdoors—hiking, fishing, hunting, mountain biking, roaming

Page, Adam, M.Div., * Gardner-Webb University Divinity School, Boiling Springs, NC, 2010, Staff Chaplain

Professional interests: Spiritual care and counseling with mental health and substance use, Moral Injury healing and recovery

Areas of research: Moral Injury

Personal hobbies and activities: Basketball, running, hiking, coaching my children's soccer teams, spending time with my family

Presnell, Andrew, Ph.D., * † University of Alabama, 2014; Staff Psychologist

Professional interests: Posttraumatic Stress Disorder, Recreation Assisted Therapies, Moral Injury

Personal hobbies and activities: Fishing, camping, sporting events, and music

Robbins, Sherry L., M.D., † James H. Quillen College of Medicine, 1989; Bristol Family Medicine Residency Program, 1992; Foundations in Integrative Health Certification (University of Arizona), 2016; she has practiced in Appalachia for almost 30 years in a variety of settings (primarily academic, but also rural, urban, and county health department), Past President of the Tennessee Academy of Family Physicians, Co-Editor of *Tennessee Family Physician* journal, gubernatorial appointee to the Tennessee Board for Licensing Health Care Facilities, and full-time caregiver to her mother, as well as being a wife, mother, and stroke survivor.

Professional interests: Family Medicine as a specialty, preventative medicine, rural medicine, Appalachian culture and medicine, integrative medicine, clinical hypnosis, and end-of-life care (with an emphasis on communication and coping skills).

Personal hobbies and activities: Photography, creative writing, crafts, cake decorating, genealogy, Appalachian folklore, and managing the family farm in rural Virginia.

Smith, Ben N, Ph.D., *†§ University of Memphis, 2017; Outpatient Mental Health Clinic, Staff Psychologist

Professional interests: Integrated Behavioral Couple Therapy, Cognitive Behavioral Therapy

Personal hobbies and activities: making furniture, home renovations, yard work, hiking

Sullivan, Rodney, Ph.D., *†§ Southern Illinois University, 1979; Staff Psychologist, Polytrauma Clinic, and private practice

Professional interests: Neuropsychology, Polytrauma

Personal hobbies and activities: Bass fishing and archery

Thorne, Kendra, Ph.D., * † Florida State University, Tallahassee, FL, 2019; Staff Psychologist, Posttraumatic Stress Disorder Program

Professional interests: Rural mental healthcare acceptability; interaction between rurality and trauma recovery; EBPs for PTSD

Areas of research: PTSD among Appalachian veterans; rural help-seeking; interactions between rurality, suicide, and trauma

Personal hobbies and activities: Attending sporting events and failing at Pinterest DIYs

Turner, Jessica Ph.D., *†§ East Tennessee State University, 2013; Residential Recovery Clinical Program Manager

Professional interests: Intimate Partner Violence; Women's Health, Public Health, Dual Diagnosis

Personal hobbies and activities: running, reading, knitting, yoga, camping, hiking, all the dogs

Williams, Jordan, Ph.D., * † The University of Alabama, 2018; Staff Psychologist

Professional interests: Borderline personality disorder, eating disorders, substance abuse, LGBTQIA+ issues, the impact of HIV on mental health

Personal hobbies and activities: Reading, watching classic films, board games, biking, running, exploring new restaurants and breweries, trivia

Yates, Quintina, LCSW. * † Radford University, Radford VA, Senior Social Worker, PCMH

Professional interests: EMDR, treatment of trauma, mental health and primary care integration, LGBTQ+, equine assisted psychotherapy

Personal hobbies and activities: riding horses, reading, trying new foods and traveling

Zapor, Heather, Ph.D., *† University of Tennessee, 2017; Staff Psychologist, Family Clinic

Professional interests: Couple and Family Therapy; Intimate Partner Violence

Personal hobbies and activities: Perfecting my many excel spreadsheets while watching the Bachelor. Pressuring my daughter to enjoy podcasts and playing board games.

INTERNSHIP ADMISSIONS, SUPPORT, and INITIAL PLACEMENT DATA

Date Program Tables are updated: July 19, 2021

PROGRAM ADMISSIONS	
<p>Applicants must be U.S. citizens in good standing with and recommended for internship by an APA-accredited Ph.D. or Psy.D. program in clinical or counseling psychology, and they must have completed 3 full years of graduate study leading to the doctorate. The applicant must demonstrate interests and goals that are consistent with the internship program, the ability to apply assessment and intervention knowledge in clinical areas, appropriate ethical conduct, the interpersonal skills necessary for the professional practice of psychology, and sufficient research skills as evidenced by dissertation progress.</p> <p>The James H. Quillen pre-doctoral psychology internship requires 1,000 hours of supervised clinical experience (intervention + assessment + supervision). Under the category of assessment, the internship looks for a variety of assessment experience that includes traditional objective and projective assessment. Although the faculty would prefer that applicants have exposure to projective assessment, we will consider candidates without this experience. The number of integrated reports expected is based on applicant group averages for prior years.</p> <p>The faculty strongly prefers applicants who have their dissertation proposal approved by the start of the internship.</p> <p>The preceding criteria serve as general guidelines for rating applicants and are not fixed rules. Faculty must rely upon their professional judgment in making decisions about intern applicants.</p>	
<p>Does the program require applicants have received a minimum number of hours of the following at the time of application? If yes, indicate how many:</p>	
<p>Total Direct Contact Intervention Hours + Supervision Hours</p>	<p>1000 hours of supervised clinical hours (intervention + assessment + supervision)</p>
<p>Total Direct Contact Assessment Hours</p>	<p>*Limitations in hours caused by COVID-19 will be factored into admissions decisions.</p>
<p>Describe any other required minimum criteria used to screen applicants</p>	<p>Completed 3 full years of graduate study, interests and goals consistent with program</p>

<u>Financial and Other Benefit Support for Upcoming Training Year*</u>	
Annual Stipend/Salary for Full-time Interns	\$26,297
Annual Stipend/Salary for Half-time Interns	N/A
Program provides access to medical insurance for intern?	Yes
If access to medical insurance is provided:	
Trainee contribution to cost required?	Yes
Coverage of family member(s) available?	Yes
Coverage of legally married partner available?	Yes
Coverage of domestic partner available?	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	104
Hours of Annual Paid Sick Leave	104
In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave?	Yes Arrangements vary, depending on situation.
Other benefits (please describe)	Access to gym for small fee; Authorized Absence with prior approval; intern bonding time

*Note: Programs are not required by the Commission on Accreditation to provide all benefits listed in this table.

<u>Initial Post-Internship Positions</u>		
2018-2021		
Total # of interns who were in the 3 cohorts	15	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	EP
Community mental health center	0	0
Federally qualified health center	0	0
Independent primary care facility/clinic	0	0
University counseling center	0	0
Veterans Affairs medical center	7	7
Military health center	0	0
Academic health center	0	0

Other medical center or hospital	1	0
Psychiatric hospital	0	0
Academic university/department	0	0
Community college or other teaching setting	0	0
Independent research institution	0	0
Correctional facility	0	0
School district/system	0	0
Independent practice setting	0	0
Not currently employed	0	0
Changed to another field	0	0
Other	0	0
Unknown	0	0

Note: “PD” = Post-doctoral residency position; “EP” = Employed position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position.